

The New England College of

Optometry

An
Optometrist
in Uniform

autumn

ALUMNI MAGAZINE

2006



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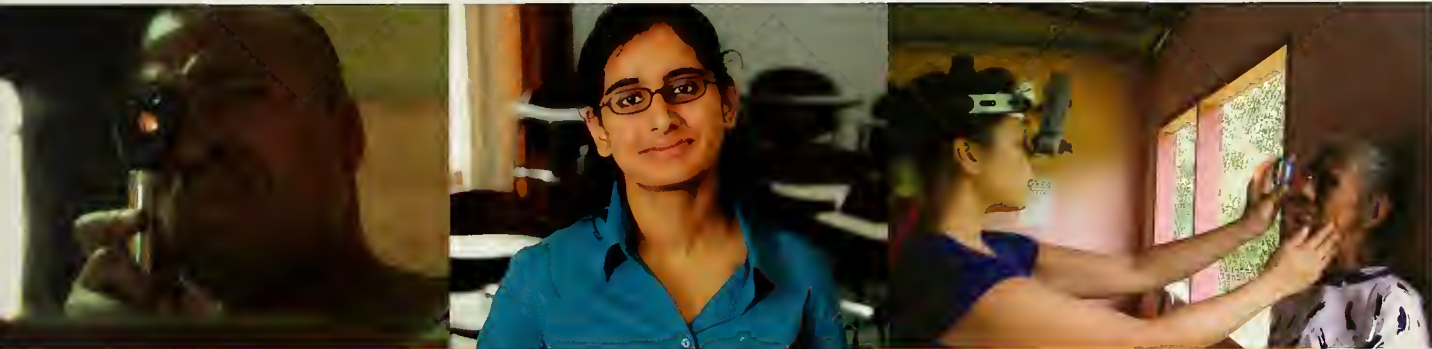
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Lt. Col. Donovan Green '92, OD, one of the Army's highest-ranking optometrists, talks about his experiences serving soldiers and some children close to the battlefield in Afghanistan, as well as in missions from Africa to Bosnia. Finding enough patients is the least of his concerns.

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A new academic program prepares NECO faculty and students to respond to the growing need to provide eye care for patients from culturally diverse backgrounds. How to you support a young girl whose parents tell her not to wear glasses because it will make her less attractive?

20

Twelve NECO students and six faculty members share their experiences working in poor, rural villages in Nicaragua this past summer. "This is like an optometric boot camp," says one faculty member. "It's total clinical immersion, coupled with cultural immersion."

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letter from the editor



Dear Alumni,

The stories in this month's issue have a distinct international flavor and illustrate why this is an exciting time to be a member of the NECO community. We'll be taking you on a journey that goes from Afghanistan and Germany to Nicaragua.

We lead off with a wonderful story about Lt. Col. Donovan Green '92, OD, one of the highest ranking optometrists in the armed forces. His story is part of our continuing series that features an alumnus and describes various career options in the field of optometry.

We also travel with a group of NECO students to Nicaragua where they spent two weeks this past summer providing critical optometric services to children and adults in rural communities (Page 20). You'll find out about the contributions they made and what they learned.

In keeping with the international focus, Elizabeth Mehren, the New England Bureau Chief of the Los Angeles Times, writes about how we're taking the lead in preparing students to work with culturally diverse populations (Page 8).

Closer to home, you'll learn about our Elders' Right to Sight Collaborative (Page 12), an important and innovative program that has already improved the quality of life and access to optometric services for more than 2,500 vision-impaired seniors in the Boston area.

Another new initiative that will be of particular interest to anyone who has opened his or her own office, is the Private Practice Leadership Institute (Page 16). This model effort brings together alumni and third years in a structured, educationally sound program that prepares the students for their future careers.

On a personal note, I join so many others – faculty, staff, alumni, students, and professionals in the field – in thanking Alan Laird Lewis '65, OD, PhD, for all his contributions to NECO as president for the past five years. Fortunately for us, he will remain an integral part of the college through his teaching and research.

Barry Wanger
Editor



More than 25 NECO students were awarded scholarships and other honors at this year's commencement which saw 86 students receive their Doctor of Optometry Degrees. Two students were awarded the Masters Degree in Vision Science and two nationally recognized optometrists were awarded honorary degrees.

Larry Clausen, OD, EdD, who served as the President of the New England College of Optometry 10 years, received an Honorary Doctorate of Ocular Science. He now serves as the Dean of Allied Health and Science at Portland Community College, Oregon's largest institution of higher education.

Jerald Strickland, OD, PhD, the Assistant Vice Chancellor for International Studies and Programs with the Southern Association of Schools and Colleges, was awarded an Honorary Doctorate of Humane Letters.

Scholarships and other awards were presented to the following:

Advanced Standing International Program Scholastic Achievement Award

Komal Thakore

Alumni Association Award

Sarah E. Hill and Hung L. Thai

Asarkof Scholarship

Michael W. Henderson

William R. Baldwin Scholastic Achievement Award

Hui-Chu J. Chang

William C. Barrett Memorial Scholarship

Thao M. Vu

Class of 1969 Scholarship

Robert J. Deck

College of Optometrists in Vision Development

Farrah F. Sunderji

Eschenbach Award for Excellence in Low Vision

Yaakov G. Zacks

F. Dow Smith Award

Jennifer Hartzell

William Feinbloom Low Vision Award

Scott D. Wheeler

Ira Schwartz Behavioral Vision Award

Catherine A. Johnson

Dr. Hyman R. Kamens Award

Jeffrey S. Kenyon

David J. Kerko Low Vision Award

Farrah F. Sunderji

Marchon Eyewear Practice Management Award

Anita A. Phromsivarak

National Optometric Student Association Award

Jazmin A. Logendra

The New England College of Optometry Clinic Award

Catherine A. Johnson

Stacy F. Pinsker and Rosemore Family Foundation Scholarship

Yaakov Zacks

RGP Lens Institute Award

William T. Alexander

Salutatory

Catherine A. Johnson

Dr. Edward Joseph Troendle, Jr. Award

Hung L. Thai

Valedictory and Beta Sigma Kappa Silver Medal

Elizabeth L. Skeya

Vision Service Plan Award

Andrea H. Chan and Kenneth R. Dickerson

Vistakon Award of Excellence in Contact Lenses

Andrew D. L. McLeod

Additional Scholarships Awarded:

Harry and Sara Pildes Scholarship

Kristy Wooler

Charles Robert Soltes Community Scholarship

Matthew Bauer, Sarah Hetu, Emily Kachinsky, Alexis Malkin, Jennifer Moncada, Jessica Medina, and Garnet Yokoi

Vistakon Acuvue Eye Health Advisor Student Scholarship

Jennifer Stewart

Wal-Mart/Sam's Optical Scholarship

Alexis Malkin

An Optometrist in Uniform

BY CLYDE WEISS

Optometry – especially when practiced on a battlefield – isn't the career path Donovan Green had envisioned when he first set out to find his calling. Being a medical doctor was.





While attending the State University of New York at Stony Brook, Green volunteered at local hospitals to gain a layman's experience in the field. He soon discovered it wasn't for him. First, he was too sensitive to the suffering of patients. He also realized that "it takes a while for a patient to get better. I wanted to see immediate results."

Optometry seemed to offer such instant gratification. "When a patient puts on a pair of glasses, you can see the gratitude," he said. Still uncertain about his choice, he applied to NECO and, in 1988, set out on his current path. He's had no regrets

Today, Lt. Col. Green, '92, OD, MBA, is one of the Army's highest-ranking optometrists. Since June 2005, he has practiced his profession at the Pentagon as the Army's Director of Ancillary Services, overseeing optometry, radiology, the laboratory and the pharmacy.

Most of his career has been closer to the battlefield – such as in Kandahar, where – as the only optometrist – he was the first to treat soldiers with severe wounds that would have been treated only by ophthalmologists outside of a war zone. "I saw things I never expected to see, such as gunshot wounds directly to the eyes. I did whatever I needed to do to prevent those patients from losing their vision." If the wounds were too severe, he would stabilize them, place a

shield over their eyes and send them by plane to an ophthalmologist at Bagrm Airbase, 27 miles north of Kabul.

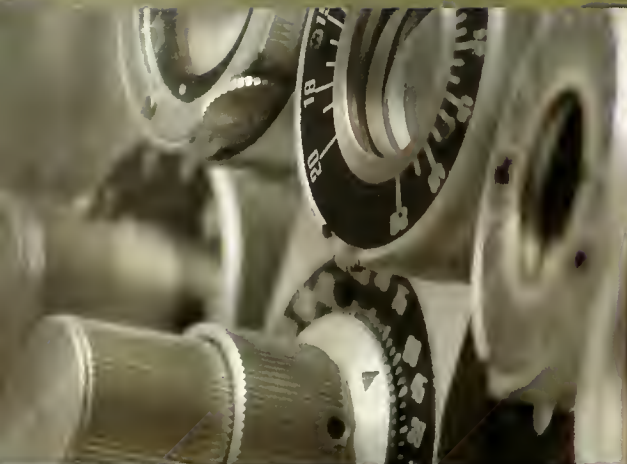
Although "safe" within an isolated perimeter, he recalled, "every now and then we would get a rocket attack, so we would have to take cover." When the firing stopped, he never knew what would walk – or be carried – into his tent. In early 2004, for instance, a U.S. Army active duty soldier with the 10th Mountain Division returned from a reconnaissance mission in Afghanistan complaining that something was in his eye. Dr. Green, then a major assigned as the Division "Task Force Warrior" optometrist, peered closely into the soldier's eye, but saw nothing. Using a slit lamp, he looked again. What he saw then made him feel ill.

"I had never seen worms in someone's eyes," he said. A fly's eggs had hatched in the soldier's eye. "I had to go in and pick out these worms with a forceps," he recalled with obvious displeasure. He spent most of the day removing more than 30 of the tiny monsters.

Dr. Green launched his 14-year military career as a ROTC Reserve Officer training while attending SUNY/Stony Brook. In 1992, upon graduation from NECO, he was "activated" and sent to Belgium as Chief of Optometry Services at the Supreme Headquarters Allied Powers – Europe (SHAPE).

"I saw things I never expected to see, such as gunshot wounds directly to the eyes. I did whatever I needed to do to prevent those patients from losing their vision."

LT. COL. DONOVAN GREEN, '92, OD



In practical terms, that meant he was the Army's only optometrist there, caring for soldiers from various NATO countries. The next nearest optometrist was four hours away, in Landstuhl, Germany.

His next assignment, in 1995, was in Korea, "close to what you'd consider the enemy," he said. Then it was off to Germany, where he was responsible for fabricating glasses and getting them to soldiers on the front lines in Iraq, Kosovo and Bosnia.

While assigned to the 226th Medical Logistics Battalion (with duty at the U.S. Army Medical Materiel Center – Europe), Dr. Green was sent on three missions to Africa. The Army was training African soldiers to protect their own country. "But to do that, they had to see to shoot their weapons," he said. Since most of them had never before received eye care, getting it was a revelation.

"When you put a pair of glasses on these soldiers, they realize for the first time that they were previously unable to see correctly," he explained. The soldiers wanted to share their good fortune with their families, but Dr. Green could not help them. "Unfortunately, treatment was not allowed since the scope of our responsibility was only for the care of the soldiers."

A short stint in Bosnia, as Chief Optometrist, followed in 2001. Then it was back to the states, where he served as Chief of the Ear, Eyes, Nose and Throat Division at Fort Eustis, in Virginia. That was a short assignment. In January 2004, he was deployed to Afghanistan with the Optometry/Optical Fabrication team. Its mission: Eye care for more than 5,000 U.S. soldiers, airmen and allied personnel, and providing them with single-vision and safety glasses.

Although he was in Afghanistan to treat soldiers, one group of civilians could not be ignored: children. His patients included a nine-year-old child who sustained a severe cornea injury from exploded shrapnel while playing in a minefield. "It's not within our nature to turn them away."

There are downsides to his job, beyond the obvious one of working on a battlefield. For instance, most optometrists graduate with a large college debt, which is difficult to pay off on a military salary.

Dr. Green managed his own loan burden with the good fortune of a college scholarship. Also, there are constant relocations, which have been most difficult on his wife, Maria, and their young son, also named Donovan. "It's just packing up every three years," he said. "That's the hardest part for us."

On the plus side, novice civilian optometrists must scramble to attract patients to their practice. "In the Army," Green noted, "you always have patients coming in, even when you don't want to, so your experience level quickly and easily broadens."

Often the only Army optometrist in a region, Dr. Green has learned and used skills that most optometrists have no need to know. Despite the dangers, he finds the job rewarding. "To be in that environment and see soldiers with all these injuries just gives me a greater appreciation for life – to know that the soldiers value what you do out there."



"In the Army,
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LT. COL. DONOVAN GREEN, '92, OD

Seeing the world through different eyes

By Elizabeth Mehren



The patient came into the examining room covered from head to toe. Her black burkha enveloped her. On close inspection, her dark eyes were dimly visible through a small, filmy section of her head covering. She did not speak, but the burly man who accompanied her—her husband—said his wife had complained that her eyesight was failing.

Little wonder, the Boston optometrist thought. But she held her tongue as she politely faced the challenge of testing her new patient's vision without violating the woman's cultural traditions.

How would the optometrist put drops in her new patient's eyes? How would she deal with a husband who might appear domineering when viewed through the lens of U.S. cultural standards? How would she work past language hurdles, since the husband spoke little English and the wife barely spoke at all?

How would this experienced eye professional handle the next patient, a man from Central America who insists that his sight is degenerating because an enemy cursed him with "the evil eye"? What will the optometrist tell the elderly Cape Verdean patient who says she doesn't need glaucoma medication because she can pray the condition away?

How does she handle the patient from Haiti who disputes her diagnosis because the witch doctor had a conflicting explanation? And what can she tell the Middle Eastern parents who forbid their myopic, 12-year-old daughter to wear glasses because it will make her look weak, and therefore less marketable for marriage?

In cities and towns across the country, the dramatic shift toward a multi-cultural population has meant adjustments for many levels of professionals. In the vital field of optometry,

practitioners suddenly find themselves facing challenges that never were mentioned in a profession that until recently was largely dominated by males, most of them white.

But as this country's inhabitants have grown more diverse, so has the training at NECO. Two grants from the Association of Schools and Colleges of Optometry (ASCO) made NECO one of four optometric institutions to introduce a system called ISEE, or Intercultural Sensitive Education for Educators.

In collaboration with the Pennsylvania College of Optometry and the optometry programs at the University of Houston and Ohio State University, NECO recently sponsored two seminars designed to help faculty increase their awareness of cultural divergences in their patient population.



**"This is the first such effort
for cultural sensitivity.**

**Really, there has not been this type of
collaborative effort within optometry
at all. Why it hasn't happened before,
I don't know."**

Elizabeth Hoppe, OD

The sessions featured two guest speakers who have studied the way treatments and examinations vary from culture to culture. LeZelle Jenkins, OD, Ohio State University, presented a model for diversity in eye care. Craig Storti, a Baltimore-based cultural awareness trainer, discussed his findings from extensive international work. Participants also tried some role-playing, putting themselves in the positions of patients from around the world who may come to an appointment with limited English and cultural expectations that are unfamiliar to a U.S.-trained eye professional.

Elizabeth Hoppe, OD, NECO's associate dean for academic affairs, said the training programs had twin purposes: "One, that by increasing the faculty's awareness, they would be better role models for students. The other was that as faculty worked with patients from more diverse backgrounds, they would be better able to handle these differences themselves. Different cultures definitely have different ideas about how their health problems occurred."

About a third of the school's faculty attended each session, Dr. Hoppe said, receiving continuing education credit for their participation. She said the ASCO grants totaled about \$12,000, with primary sponsorship from Vistakon.

In follow-up surveys months after the training, 77% of participants said they had a greater awareness of cultural diversity as a result of the seminars. More than half of survey respondents also said that thanks to the training, they were providing more culturally sensitive patient care.

"This is the first such effort for cultural sensitivity," Dr. Hoppe explained. "Really, there has not been this type of collaborative effort within optometry at all. Why it hasn't happened before, I don't know."

The move toward faculty training parallels a change in NECO's own cultural profile. The class of 2010, which launched its studies last year, is about 30% Asian, according to Lawrence Shattuck, director of admissions. That figure is nearly twice what it was just 10 years ago, Shattuck said. These Asian students reflect a vast span of the globe, tracing their roots to China, Vietnam, Japan, Korea, India and several Pacific islands, he noted.

However, even aggressive attempts at recruiting other minority groups have met with limited success, according to Shattuck. Only about 4% of the new class is Latino. For African-Americans, the figure is no higher.

"We have gone to recruit at predominantly black colleges, such as Spellman, Clark, Morehouse, Howard and Tennessee State," Shattuck said. "There is not yet as much ethnic diversity as we would like. We are looking to broaden our diversity picture in every way possible."



"You don't know who the next patient is going to be—where he is from, or what language he will speak. You need to be able to show respect and gain understanding."

Balprit Dhillon '09



Looking around a clinic, or an introductory lecture for the first-year class of 110 students, one area where change is apparent is gender. More than three-quarters of the new class is female.

Studies show that women are dominating graduate programs in many fields, and most of that change has occurred in the last decade. NECO's transformation to a largely-female student body is no exception; about 10 years ago, the school hit the 50% mark for women students, showing steady growth ever since, Shattuck said.

Optometry is attracting a growing number of women because it affords the potential of flexible hours—and even flexible ownership of a practice, school officials maintain. Female optometrists thus have a chance to balance work and family demands that eludes many women in other areas of health care.

The field also offers excellent, gender-blind earning potential. The average optometrist with 11 to 15 years of experience earns about \$116,000 per year, Shattuck said. Starting salaries hover around \$70,000 to \$75,000 for men and women alike, depending on where they locate, he said.

Another consideration is the chance to become involved in a community through clinics and other outreach efforts. Many women find that option particularly attractive, Shattuck and others said.

Second-year student Balprit Dhillon said NECO's clinic work in Boston was what had most exposed her to different ethnic groups—and especially, different languages.

“In clinics, they encourage us to speak foreign languages,” said Dhillon. “In that way, there is the sense of trying to gain knowledge about different communities.”

She added: “Spanish is definitely very, very beneficial. Now I wish I had taken that class back in high school.”

But because of her Indian heritage, Dhillon does speak Punjabi and “a little bit of Hindi,” languages she expects to use while practicing after she graduates.

“My friend who speaks Chinese is in really good shape,” said Dhillon, 22.

Dhillon said she and other students welcome their school's new focus on expanded cultural and ethnic awareness.

“Being knowledgeable about the different cultures is very important,” she said. “You don't know who the next patient is going to be—where he is from, or what language he will speak. You need to be able to show respect and gain understanding.”

Dhillon, whose family lives in Toronto, said the main key to cultural understanding is gaining trust—and hence, earning respect—in exchanges with diverse patient populations.

“When someone trusts you, there is a greater chance that that person will reveal what's on their mind,” she said. “You get them to trust you by modifying your approach, and by knowing that they may react in a certain way to certain things that you say. You understand, for example, that if this patient is wearing a *hajib*—a traditional headdress worn by women in many Middle Eastern societies—well, okay, this is part of the culture.”

Her own goal, she said, is to be “a doctor who everybody's comfortable with, no matter where they come from. We should be at a level where all our patients can trust us and confide in us.”



Providing Seniors



When New England Eye Network's occupational therapist Jennifer Kaldenberg started outreach efforts as part of the "Elders' Right To Sight Collaborative" (ERTS) program in 2004, she sensed an immediate need for the service. At a senior citizen facility on the North Shore, and later in Boston Housing Authority apartments, she found elders with a host of vision problems and associated issues.



with the “Right to Sight”

By Peter Golden



“Our goal was to improve the quality of life and access to the community for vision-impaired seniors,” says Kaldenberg, who along with NECO staff and students, first looked for patients where optometric or medical interventions could make a difference. But her personal goal was to help elders cope with the aging process by teaching them new life skills through ERTS, an innovative program focusing on assessment, education, examinations and referrals for visually impaired Boston-area seniors.

Soon Kaldenberg and Gary Chu ’95, OD, MPH, ERTS program director, realized they needed to go beyond traditional concepts of eye care and find ways to make constructive environmental changes, whether at home or in the neighborhoods where seniors socialize or shop.

A unique program

While ERTS to date has provided services for more than 2,500 seniors

– most recently in Boston Housing Authority residences – the clinical and health services that form the core of NEEI Network programs have led to some unexpected insights.

“The home assessments conducted as part of ERTS have revealed some interesting data,” says Kaldenberg.

“We go in one-on-one and look at lighting – it varies widely room-to-room and is often inadequate – and then go on to safety concerns like walkways, clutter, trip and fall hazards and the like. The data often reveals the need for adaptive equipment or high-contrast painting schemes in places like bathrooms.”

As the outreach components of ERTS developed, new insights came too. “One thing we discovered was that every senior and every residential setting had a unique character and set of problems,” said Dr. Chu as part of his remarks at the fourth annual Boston Healthy Vision Conference, held recently in Boston. “Developing trust with our patients was important.”

The issue might be depression, lack of financial resources, or physical disability,” Chu noted. “As our work progressed we realized we had to begin to think out of the box; that what we were finding went beyond traditional concepts of eye care.”

Alan Lewis ’65, OD, PhD, retiring NECO president, views the ERTS program with special interest. “As a model for health care delivery it integrates eye care into areas where we have been absent both in terms of application and formulation of policy. The American Optometric Association is using this program and others developed at NECO as national models.”

The potential for ERTS is echoed by Barry Barresi ’77, OD, President of NEEI. “As a teacher of health policy I’m seeing something here that goes beyond the boundaries of our organization. I want to see this program spawn an incubator for determining policies and procedures in the public arena.



"Our goal is to improve the quality of life and access to the community for vision-impaired seniors."

Jennifer Kaldenberg

"The message for NECO alumni, many of whom are facing aging issues themselves, is to begin look at the consequences of not dealing with this now. Younger ODs have an opportunity to become sensitized to something effecting more and more of their older patients."

Vital expedients

Findings arising from ERTS have ranged from such simple but vital expedients as providing low-income elders with compact florescent reading bulbs to boosting light levels in rooms deemed so dark as to present physical danger due to poor contrast, especially in areas where falls can occur.

Since initial outreach efforts began, including the path-breaking conference in 2004 that helped launch the ERTS program, NEEI Network staff has found a growing chorus of support for their work.

Sally Rizzo, Director of Vision Community Services, for MAB

(formerly the Massachusetts Association For The Blind) and a presenter at the conference in Boston, says she is excited about the broad health implications of ERTS.

"When people talk about elders the issues are things like diabetes, depression, falling and hip replacements," she points out. "But the fact is that health-care organizations waste countless millions because seniors aren't equipped to deal with vision loss. The insurers have to wake up!

"If you've got diabetes and you're experiencing vision loss, it's hard to see your glucose meter, so you end up in diabetic shock and that means a trip to the emergency room," she said.

"If the commercial and medical devices marketplace could understand the issue based on hard data they'd support the development of a 'talking' glucose meter," adds Rizzo. "That would make it infinitely easier for seniors to care for themselves and save enormous amounts of money."

A vast increase in numbers

As the Post-WW II generation begins to hit retirement next year, the wakeup call Rizzo seeks will most likely be a loud one. With Americans over the age of 60 now representing upwards of a fifth of the US population, there is a need to adapt to seniors and the way they see.

"Of all the issues we been looking at with regard to seniors – housing, transportation and access to healthcare, vision and the 'seeing environment' are by far the most important and the most under-recognized," says Maureen Flynn, who manages community relations and public education for the Boston Partnership For Older Adults.





"What the ERTS team has done that is so brilliant is to say that vision is a right for older people and then to ask a question: 'What are the systems that will help change their visual environment for the better...and how can they be strengthened?'"

Thinking about access

"The whole idea of thinking about light and vision with reference to seniors is a wonderful idea," says Valerie Fletcher, Executive Director of Adaptive Environments," an award-winning organization based in Boston whose name reflects its mission.

"When people think about access they're invariably focusing on mobility impairments," she adds, "but there are many ways that the environment can be more accommodating to people with vision problems."

One aspect of that accommodation lies in shopping, which is important to vision impaired seniors in numerous ways. Keeping active is vital to the physical and mental health needed for "aging in place," so ERTS is partnering with Mission Hill Main Streets in Roxbury, one branch of a city and nation-wide program working to understand how signs and cityscape modifications can help elders stay active.

"When you do something like this for visually impaired seniors you're also able to meet the needs of the population as a whole," adds Dr. Lewis.

Drs. Lewis, Barresi and Chu along with Kaldenberg and over a dozen ERTS partner organizations are currently assessing program expansion options, with professional and community relationships at the top of their list.

"I am passionate about the importance of collaborations between optometrists, occupational therapists and vision impaired seniors," says Sue Berger of Boston University's Sargent College, another presenter at the recent ERTS meeting in Boston. "Optometrists fix vision problems; OTs fix the function."

If the growing interest and excitement surrounding the Elders' Right To Sight program is any indication, its collaborative aspects will meet Berger's criteria.

Going forward, the challenge for NEEI and its ERTS partners will be to ensure the policies and programs required to empower more functionally effective seniors, both in Greater Boston and across the nation, will meet a growing and ever-more compelling need.

"...the fact is that healthcare organizations waste countless millions because seniors aren't equipped to deal with vision loss. The insurers have to wake up!"

Sally Rizzo





Private Practice Leadership Institute

By Martin Pave





For generations of NECO students, the most popular career path involves putting up your own shingle. For Kimberly Nolan, a third year student whose dream has been to establish her own private practice, the road will be a bit less bumpy, thanks to a new program launched earlier this year.

Nolan has been working this summer in the Newburyport, MA office of William Watts '68, OD as part of the Private Practice Leadership Institute (PPLI) – an innovative program that links students with alumni practitioners in the Boston area.

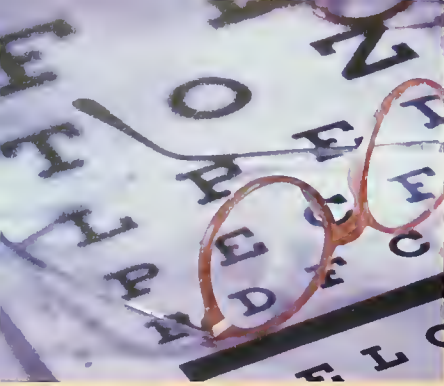
After her experience working with Dr. Watts and learning about both the business and patient side of running an optometry practice, Nolan, from East Greenwich, R.I., is convinced that putting out her own shingle is the correct choice for her.

"It's 100 percent what I want to do," said Nolan. "I really enjoyed seeing how a business is run and how the finances work. I was grateful to have the opportunity to see my own patients."

For Dr. Watts, serving as a mentor for Kim and two previous NECO students has had its own rewards.

"It was fun to see Kim blossom because she took hold of things and stepped right up," he said. "She saw patients on her own, observed the front office, watched me with my own patients and worked with our opticians in the dispensary. I can truthfully say my patients loved all three interns who have worked here."

PPLI program leader Mark O'Donoghue '82, clinical director at New England Eye Fenway/Commonwealth called the link-up "a creative approach to getting our students to see patients in an environment that has not traditionally been part of the educational structure. It's an opportunity to work with professionals who are not only clinicians, but also manage a business, so our students are getting a multi-dimensional experience."



Alumni mentors currently involved with the PPLI program also include Drs. Steve Sikalis '84 in Lowell, Neil Kozol '81 in North Easton, Alan Titelbaum '81 in Somerville, Debbie Wayne '83 in Chelsea and Kathy Coffey '89 in Milton.

Dr. Watts, a classmate of one of the program's Steering Committee members, Clifford Scott '68, OD, MPH, already had experience as a mentor when he gave a Bowdoin College graduate a summertime opportunity in his office four years ago.

"She eventually went into the field so when Cliff (Scott) asked me if I'd like to participate in the PPLI program, I said 'great,'" recalled Dr. Watts, whose student interns visited his office on a once a week basis.

"It was a chance for them to expand the scope of their capabilities," he said, "and for me to show them what it's all about. Clinics and hospitals give the student a very nice medical background, but not the overall experience, obviously, of private practice."

Dr. Scott said that, over time, the patient care experience for third year students had evolved into a program based almost exclusively in clinic-type settings. The opportunities for third year students to intern at private practices were extremely limited prior to PPLI, he noted.

"There was no formal structure to give them exposure to private practices

and we realized that was a shortcoming," explained Dr. Scott, chairman of NECO's Department of Community Health.

"We needed to find them educationally sound off-campus experiences. We chose practitioners who have a commitment to education and who wanted to give back to their profession and their school."

When David Heath '83, OD, EdM vice president and dean of academic affairs, applied for a grant to the California-based Vision Service Plan (VSP) in the summer of 2005, it was noted that, in the past 20 years, there has been a steady decline in the number of optometry school graduates entering the private practice of optometry.

VSP, one of the country's leading eye care health coverage companies with a network of 23,000 doctors, gave the college \$63,200 to establish and administer the program last December. Patricia Cochran, VSP's chief financial officer, said NECO's approach stood out among colleges and universities attempting to link third-year optometry students with private practitioners.

"We're definitely interested in promoting independent practice experiences for the students," said Cochran. "A number of colleges applied for grants which included networking days or incorporating practical management into their curriculum, but the New England College of Optometry's approach was pretty unique."



"Dr. Kozol always took time to see how I was doing and he was also willing to learn from me because there are some things taught today that weren't taught when he was a student. I think we enjoyed the give and take."

Michael Hill '07



“PPLI has been a very positive experience... it’s one I’d like to continue.”

Neil Kozol '81, OD

And if there were concerns that young people being exposed to private practice for the first time could bog down the daily routine, Dr. Watts dismissed them.

“The positive far outweighed the negative,” he said. “Sure, I had to slow down sometimes to answer questions, “but I found that to be invigorating. Sometimes, I even went back to the textbook.”

Elizabeth Hoppe, OD, DrPH, the college’s Associate Dean for Academic Affairs, agrees that the program has provided an enhanced educational opportunity for NECO students.

“Many students enter optometry school with a goal of establishing their own private practice,” said Dr. Hoppe, “but the educational process has not traditionally provided them with much hands-on experience in this area.”

That’s why the program was tailor-made for student Michael Hill of Harwich, whose father, Donald '73, and sister, Erica '03, are NECO graduates who work at the family’s practice in Dracut. Donald Hill, who opened the practice 30 years ago, formerly taught at the college.

“I definitely want to go into private practice, I feel it’s the way to go because it gives you a little bit of everything,” said Hill, who interned with Dr. Kozol last winter and spring and gained experience not only in seeing patients but in learning the nuances of billing and insurance.

“Dr. Kozol always took time to see how I was doing and he was also willing to learn from me because there are some things taught today that weren’t taught when he was a student. I think we enjoyed that give and take,” Hill said.

Dr. Kozol, who also has had three students work at his practice, said he wasn’t sure what to expect when he agreed to mentor them.

“But I found out right away with Michael that it was like having another set of arms,” he said. “The longer he was here the less I had to check on him and he never betrayed my trust. I tried to talk to all of the students about running the business, which can be a daunting task, and I think the initiative program is a great idea.

“You know, I was thinking about something like this and then I got the phone call about participating and I’m happy I did. It’s been a very positive experience,” said Dr. Kozol, who echoed the sentiments of his fellow mentors. “It’s one I’d like to continue.”

Dr. Hoppe said that prior to the program’s inception, optometric educators had concerns about the quality of education in a private practice. Questions arose, she said, such as ‘is the doctor up to date on the latest research findings, is the equipment state of the art, will the student be able to exercise an appropriate level of independence and clinical decision-making to forward their development?’

“There was also a concern as to whether placing students in a practice would adversely impact the practice because they are slower and have not mastered all required techniques,” she noted. “Will patients accept care from someone other than their own doctor, will the additional time required to educate students reduce practice revenues, will students make mistakes because they don’t have enough experience?”

With those questions in mind, the participating practices were carefully selected.

“And based on the results, we believe it has been a win-win situation,” said Dr. Hoppe, who is looking forward to adding a seminar component to the program for the next generation of optometrists.



Making a Difference IN NICARAGUA

By Pat Gale

A distant, poor country. A foreign language. And a steady stream of patients, examined in considerably less-than-ideal conditions. All in all, a fabulous learning environment.

For the NECO students and faculty members who spent two weeks in Nicaragua this summer, the combination did, indeed, create an extraordinary classroom. As the students prepared to return to school for their third-year classes this fall, words like dynamic, excellent, and incredible were in ample supply during discussions of their summer learning adventure.

"It was great to be able to go into patient care and have such an intense experience with patients the whole day, every day," said Andrea Murphy, '08, who left her Missouri home for the trek to San Juan del Sur, Nicaragua. It was not the first overseas experience for Murphy, who had studied in London as an undergrad — but it did pose new challenges. "I didn't know much Spanish," she admitted, "but I learned enough to get by."

That on-the-job learning came as no surprise to Associate Professor Erik Weissberg, OD. The trip, Weissberg said, "provides two major objectives: It's an incredibly intense clinical experience, and it gives the students a global perspective on what our role is in delivering eye care in developing countries."

Weissberg, who has been traveling to Nicaragua for 10 years, said that over time his views on the delivery of that

service have changed — and he hopes his students will also give thought to the issue. "A trip like this exposes them to the pros and cons of all the different approaches, so they can go forward and be more enlightened... and hopefully dedicate a portion of their career to this type of work," he said.

From Weissberg's perspective, there is value to the "parachute" type of visit that groups like the just-returned NECO entourage make to countries that lack medical resources. But more important, he suggested, is a model that creates a sustainable system of eye care, where local residents learn to do screening and provide basic services. "The 'parachute' method can be used to build relationships with local indigenous people ... but we can work to devise a tailored program that will work to make a permanent difference."

That kind of system is taking hold in San Juan del Sur, he said, where a VOSH (Volunteer Optometric Services to Humanity) group has established an eye clinic. "Now people can work in this eye clinic, and there is a pharmacy dispensing ocular medications. So for this village, there has been a permanent difference," he said.

But, as the group of 12 students, six professors and two residents saw in August, there is still an immeasurable amount of work to do, especially in the countryside.

"Very few of the people we saw had ever been seen by an eye doctor before," noted Alexis Malkin, '08, from Wichita, Kansas. On the first day of clinical work, she said, she saw a half-dozen patients. By the end of the two-week trip, she was seeing about 17 patients of all ages each day — thanks to a combination of improved clinical and language skills that made communicating with patients easier.

The students did exams in brightly sunlit rooms, sometimes kneeling to examine adult patients sitting in elementary-school size chairs. "It was amazing how much better our clinical skills got in such a short time," Malkin said.

That, too, came as no surprise to Dr. Weissberg, or to Bruce Moore, '75, OD, Chair of the Department of Specialty and Advanced Care, who also went on the trip — along with his wife and three adult children. "This is like an optometric boot camp," he said of the experience. "It's total clinical immersion, coupled with cultural immersion — they are operating in a place where they see things they've never seen before, and experience things they've never experienced before."

"It's not a training program," he said. "It's real life."

Moore and Weissberg have seen it before, traveling with students to deliver eye care to people who otherwise would never know that solutions as simple as reading glasses even exist. But for Weissberg, this was the first trip with such a large contingent of students — and at such an early stage in their education.

Kyla Smith, '08, who had been to Nicaragua with Dr. Moore and Dr. Weissberg earlier in the year while conducting research for her Master's program, was familiar with the region.

But she was amazed by the intensity of the August trip. "We saw so much more than we would ever see here (in Boston)," she said. "You just couldn't ask for a better experience."

While the students saw scores of patients with presbyopia — and changed their lives with reading glasses provided by VOSH — they also saw more unusual cases. "There's a complete absence of access to eye care in the rural areas" that students reached by long, bumpy rides over unpaved roads.

Some eye conditions the students saw, Dr. Weissberg said, "they will never see again. Others, they may see once in five years." Over the two-week period, he noted, eight cases of retinal detachment were seen at the clinic, and the majority of the students were able to see those patients. Some of the detachments were new, he noted, while others were long-standing. "They got to see a rare condition in a variety of presentations in a short period." A number of patients whose examinations revealed a need for prescription lenses will get new glasses later this year, after they've been fabricated in Boston and shipped south.

Before leaving, Weissberg was concerned about the ability to balance clinical education with eye care delivery,

since both were important components of the trip. "We wanted to spend enough time with the students, and also allow them to have enough contact time with patients, while not making people wait 5 or 6 hours on line in 90 degree heat," he said. Those fears were unfounded, though, as the students' enthusiasm kept them working until every patient was seen every day, and kept them carrying on discussions long past day's end.

"In the short term, these students gained experience that otherwise could take years," Weissberg said. "They saw a lot of patients, and very complicated patients. You could just see them gaining maturity. I don't think they'll realize quite how much they learned until they get back to school and start talking to other people."

And in the long term, he hopes the students remember the experience — and are driven to repeat it. "It's addicting," he said. "It's not altruism. I get so much more out of it than I give. I think the students felt that. They just didn't want to stop."

The idea the faculty worked to instill in the students is simple, Dr. Weissberg said: "Humanitarian work is not charity work. The people we are trying to help were just born in a different place, with different resources, and they deserve this care."



"This is like an optometric boot camp. It's total clinical immersion..."

Erik Weissberg '97, OD

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Welcome Back...

Join us October 13 –October 15, 2006 for a weekend of fun, food and friends. Alumni weekend will be a wonderful opportunity to reminisce with old classmates and meet other NECO alumni. From taking a trolley tour of Boston to reuniting with faculty members, this weekend will provide memories to cherish. We hope to see you there!

WEEKEND ACTIVITIES INCLUDE:

Continuing Education Cocktail Reception
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Check the website for up to the minute details!



Introducing...

THE FOSTER NAMIAS SOCIETY

Next year, The New England College of Optometry will establish a new gift recognition program to be named **The Foster Namias Society**. The society's purpose is to recognize alumni and friends who have included the college in their estate plans, either by making a bequest in their wills or through a life income gift in the form of an annuity, charitable trust, or contribution to the College's pooled income fund. Alumni and friends who have made such gifts or bequest intentions and who have notified the College will become charter members of **The Foster Namias Society**.

If you would like to become a charter member, please notify us that you have included the College in your estate plans. You may contact the Advancement Office at (617) 236-6285 or email Vice President for Institutional Advancement, David Wilber, at wilberd@neco.edu.

The College will officially announce the society next spring and would like to have as many charter members as possible. A bequest or life income gift is an excellent way to help the College that Foster so dearly loved.

*If you have included The New England College of Optometry in your estate plans,
please fill out and return the inserted postcard.*

New England Eye Commonwealth Scheduled to Open January 2007



The New England Eye Institute, the largest provider of eye care services in Greater Boston, has announced the opening of a new clinical flagship facility scheduled for January, 2007. The new facility, to be called New England Eye Commonwealth, will be centered in a medical complex at 930 Commonwealth Avenue on the campus of Boston University. It will replace New England Eye's Fenway practice located on Boylston Street. Naming the new facility New England Eye Commonwealth conveys both the facility's geographic location and the NEEI Network's evolving linkage to the Commonwealth Medical Group, an array of medical and dental services co-located on the Boston University campus.

The relocation of NEEI's flagship clinic to a new and modern health care space will offer improved patient care. It will also create new alliances to grow patient volume and expand teaching experiences for NECO students. New England Eye Commonwealth's state-of-the-art resources and equipment will help students and clinicians provide comprehensive diagnosis and treatment to patients throughout eastern Massachusetts with a range of eye care needs.

Nisse Joy Olsen Joins Institutional Advancement Office

Nisse Joy Olsen has been named the new administrative assistant in the Office of Institutional Advancement. She is a recent graduate of Gordon College where she served as a student assistant in the Development Office, spearheading the Class of 2006 Gift Program. She also served as an intern with the North Shore Music Theatre where she coordinated their annual fundraising gala and auction.

Alumni Association Membership Jumps 70 Percent

Membership in the Alumni Association membership has jumped some 70 percent this year, from 150 to 215 members, one of the largest increases in NECO's history.

Association officials attribute the sharp increase to the interest generated by new and expanded programs, including the Alumni Mentor Program, Career Seminar and student scholarships.

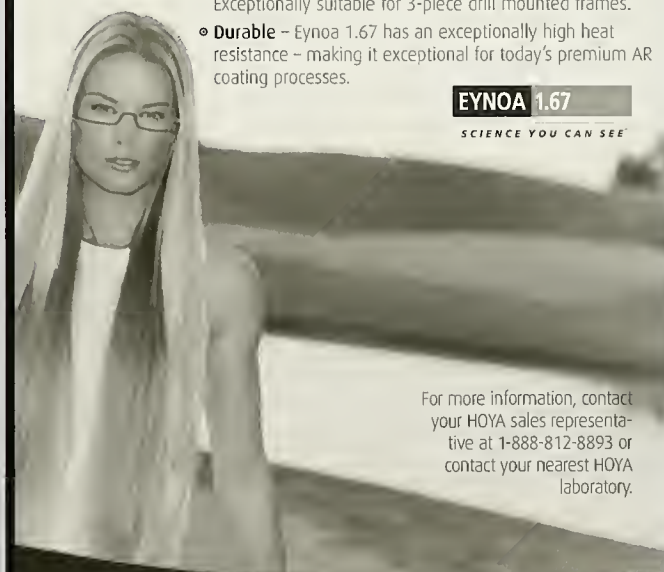
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New Faculty

➤ Anna Maria Baglieri '05

Dr. Anna Maria Baglieri has been named an Attending Optometrist within the Individuals with Disability Service and as a NECO faculty member with the rank of adjunct Clinical Assistant Professor. Dr. Baglieri earned her O.D. from NECO in June 2005 and went on to serve as a Pediatric Optometry Resident within NEEL. Dr. Baglieri's areas of expertise include pediatrics, special populations, and primary care.

➤ Jason Chin '04

Dr. Chin has joined NEEL as an Attending Optometrist in the Contact Lens Service, completed a Cornea and Contact Lens Residency at NECO in 2005 and was a George Mertz Contact Lens Residency Award Winner. He also serves as a Clinical Assistant Professor with interests in contact lenses and clinical research. Dr. Chin works in a private practice in Newburyport when not at NEEL and does FDA clinical trials on new ophthalmic drugs with ORA Clinical Inc in North Andover, MA.

➤ Leonard Contardo '80

Dr. Leonard Contardo was recently named Director of Eye Care Services at the Joseph M. Smith Community Health Center as a NEEL Attending Optometrist in the Health Centers Service. He also has the rank of adjunct Clinical Assistant Professor at NECO. Dr. Contardo brings with him over 25 years of clinical experience and more than 20 years of work in private practices throughout New England. In 1994, he designed and opened the Optometry Department at Great Brook Valley Health Center and also served on the Board of Directors of The North End Community Health Center and The North End Nursing Home for 15 years.

➤ Thomas Freddo '76

Dr. Freddo has been appointed as the new Director of the School of Optometry at the University of Waterloo in Canada. He has served as a professor both at NECO and at the Boston University School of Medicine where he earned a Ph.D. in anatomy at Boston University. He has won the Dupuis-Pellerin Award for teaching on multiple occasions at NECO and has been instrumental in the development of our proposed combined O.D./Ph.D. program with the BU School of Medicine Graduate School. He serves on the Board of the American Academy of Optometry and has been elected as the next president of ISER.



➤ Bridget Hendricks '05

Dr. Hendricks, a graduate of the Master of Science in Vision Science program, has joined the faculty as a full-time, tenure-track Assistant Professor of Optometry. She completed her residency in

Ocular Disease and Primary Care Optometry at the VA Boston Healthcare System. She will provide clinical care at Boston Medical Center, teach Integrative Seminars, as well as Principles and Practice of Optometry. She will also continue to pursue her research interests in vision perception and ocular disease.

➤ Zeinur Khan, OD

Dr. Khan joins the professional staff of NEEL as an Attending Optometrist serving within NEEL's Health Centers Service. She will be providing clinical care at the Whittier Street Health Center and hold the rank of adjunct Clinical Assistant Professor at NECO.

➤ Mark O'Donoghue '82

Dr. O'Donoghue has been named Clinical Director of New England Eye Fenway/ Commonwealth of the New England Eye Institute. Dr. O'Donoghue, who has more than 20 years of experience of clinical experience in the greater Boston area, will also hold the rank of Clinical Associate Professor. He has spent the last 13 years with Ophthalmic Consultants of Boston and has been an active member of the Massachusetts Society of Optometry. Dr. O'Donoghue's areas of interest include primary health care and contact lenses.

➤ Purvi Patel, OD

Dr. Patel has joined the NEEL professional staff as an Attending Optometrist at the Dimock Community Health Center. Dr. Patel graduated from the SUNY College of Optometry with an O.D. in 2000 where she completed a residency in Ocular Disease and Special Testing. She recently worked as the Director of Eye Care Services at the Whittier Street Health Center. Dr. Patel has been an Affiliated Clinical Professor with NECO since 2003.



➤ Kerri Yoshiyama, OD

Dr. Kerri Yoshiyama joins NEEL's professional staff full-time in NEEL's Health Centers Service as an Attending Optometrist and was recently named Director of Eye Care Services at the Geiger Gibson

Community Health Center. Dr. Yoshiyama will hold the rank of adjunct Clinical Assistant Professor at NECO. Dr. Yoshiyama graduated from the University of California, Berkeley, with an O.D. in 2004 and recently has worked in optometry practices in both the San Francisco Bay area and in the greater Boston area. Her recent lectures at Berkeley have included such subjects as crystalline keratopathy and ocular ischemic syndrome and large vessel disease. Welcome, Dr. Yoshiyama.

Retiring

➤ Gary Moss '74

Dr. Moss, who has been associated with the College for 28 years, has retired. from the full time faculty of the New England College of Optometry effective June 30, 2006. He plans to move with his family to a new five-acre horse farm in Florida later this year.

Faculty News

➤ ASCO Faculty Development Institute

Drs. David Heath, Elizabeth Hoppe, and Elise Harb represented the College at the inaugural ASCO Faculty Development Institute. The Institute was designed to assist new faculty in goal-setting and career development. Drs. Heath and Hoppe served as event organizers and institute faculty while Dr. Harb was an active participant. The Institute was rated as a success by all and will become a biennial event.

➤ Dr. Nancy Coletta

Dr. Coletta has been elected to a four-year term to the program committee of the Association for Research in Vision and Ophthalmology. She also currently serves as a Technical Group Chair of the Optical Society of America. Dr. Coletta also reviews NEI grants regularly as a member of the Visual Systems Small Business Special Emphasis Panel.

At this past ARVO meeting in May, Dr. Coletta presented a paper entitled "Internal compensation of lateral coma aberration: relationship to refractive error," co-authored by Dr. Anne Moskowitz and Jamie Han. She also moderated a paper session on Aberrations and Retinal Image Quality and co-authored a poster with Dr. David Troilo and Kristen Totonelly entitled "Lens-induced refractive errors alter the pattern of peripheral refractive state in marmosets." Last fall, Dr. Coletta presented a poster entitled "Pupil displacement in videokeratoscopy is correlated with axial length," co-authored by Dr. Anne Moskowitz and Jamie Han.

➤ Dr. Elizabeth Hoppe

Dr. Hoppe was recognized as one of the 50 Most Influential Women in Optical in the July issue of Vision Monday. She is first woman in optometry to hold the Dr.PH. degree and is the first woman to be chosen as editor of the Association of Schools and Colleges of Optometry's peer reviewed journal, Optometric Education.

➤ Faculty in "Optometry"

The August issue of Optometry, Journal of the American Optometric Association, features contributions from the following NECO authors: David Heath '83, Bruce Moore '75, Trinh Khuu, Doug Hoffman '80, Marjie Rah, Li Deng, Rich Frankel, and Elizabeth Hoppe.

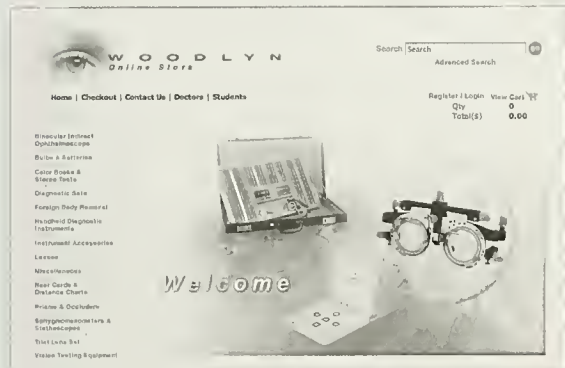
➤ Ron Watanabe

Dr. Watanabe, Chief of Contact Lens Services at NEEL since 1994, is reducing his workload from full to part-time so he can pursue additional opportunities within his private practice. He will continue to work in the college's patient care programs.

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